



Complete Summary

TITLE

Caesarean section: proportion of women delivering babies in acute care hospital by Caesarean section.

SOURCE(S)

Canadian Institute for Health Information (CIHI). Health indicators 2008: definitions, data sources and rationale. Ottawa (ON): Canadian Institute for Health Information (CIHI); 2008 May. 39 p.

Measure Domain

PRIMARY MEASURE DOMAIN

Use of Services

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the [Measure Validity](#) page.

SECONDARY MEASURE DOMAIN

Does not apply to this measure

Brief Abstract

DESCRIPTION

This measure is used to assess the proportion of women delivering babies in acute care hospital by Caesarean section.

RATIONALE

Caesarean section rates provide information on the frequency of surgical birth delivery relative to all modes of birth delivery. Since Caesarean section delivery increases maternal morbidity/mortality and is associated with higher costs, Caesarean section rates are often used to monitor clinical practices with an implicit assumption that lower rates indicate more appropriate, as well as more efficient care.

PRIMARY CLINICAL COMPONENT

Caesarean section

DENOMINATOR DESCRIPTION

Number of deliveries (live births and stillbirths)

Note: Refer to the original measure documentation for the International Statistical Classification of Diseases, Injuries, and Causes of Death, Ninth Revision (ICD-9), International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Canadian Enhancement (ICD-10-CA), Canadian Classification of Diagnostic, Therapeutic, and Surgical Procedures (CCP), and Canadian Classification of Health Interventions (CCI) codes.

NUMERATOR DESCRIPTION

Number of Caesarean sections

Note: Refer to the original measure documentation for the Canadian Classification of Diagnostic, Therapeutic, and Surgical Procedures (CCP) and Canadian Classification of Health Interventions (CCI) codes.

Evidence Supporting the Measure

EVIDENCE SUPPORTING THE VALUE OF MONITORING USE OF SERVICE

- A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence
- A formal consensus procedure involving experts in relevant clinical, methodological, and organizational sciences
- One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

NATIONAL GUIDELINE CLEARINGHOUSE LINK

- [Caesarean section.](#)

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Monitoring and planning
Variation in use of service

EVIDENCE SUPPORTING NEED FOR THE MEASURE

Canadian Institute for Health Information (CIHI). Health indicators 2008. Ottawa (ON): Canadian Institute for Health Information (CIHI); 2008. 96 p.

State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

Federal health policymaking
Monitoring and planning
National reporting

Application of Measure in its Current Use

CARE SETTING

Hospitals

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Physicians

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Regional

TARGET POPULATION AGE

Unspecified

TARGET POPULATION GENDER

Female (only)

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

In Canada in 2005-2006, the proportion of women delivering babies in acute care hospitals by Caesarean section was 26.3%.

EVIDENCE FOR INCIDENCE/PREVALENCE

Canadian Institute for Health Information (CIHI). Health indicators 2008. Ottawa (ON): Canadian Institute for Health Information (CIHI); 2008. 96 p.

ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

BURDEN OF ILLNESS

Unspecified

UTILIZATION

Unspecified

COSTS

Unspecified

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

Not within an IOM Care Need

IOM DOMAIN

Not within an IOM Domain

Data Collection for the Measure

CASE FINDING

Users of care only

DESCRIPTION OF CASE FINDING

Deliveries (live births and stillbirths)

DENOMINATOR SAMPLING FRAME

Patients associated with provider

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

Number of deliveries (live births and stillbirths)

Note: Refer to the original measure documentation for the International Statistical Classification of Diseases, Injuries, and Causes of Death, Ninth Revision (ICD-9) and International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Canadian Enhancement (ICD-10-CA) codes.

Exclusions

Exclude deliveries in which an abortive procedure was recorded.

Note: Refer to the original measure documentation for the Canadian Classification of Diagnostic, Therapeutic, and Surgical Procedures (CCP) and Canadian Classification of Health Interventions (CCI) codes.

RELATIONSHIP OF DENOMINATOR TO NUMERATOR

All cases in the denominator are not equally eligible to appear in the numerator

DENOMINATOR (INDEX) EVENT

Clinical Condition
Institutionalization
Therapeutic Intervention

DENOMINATOR TIME WINDOW

Time window brackets index event

NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions

Number of Caesarean sections

Note: Refer to the original measure documentation for the Canadian Classification of Diagnostic, Therapeutic, and Surgical Procedures (CCP) and Canadian Classification of Health Interventions (CCI) codes.

Exclusions

Procedures coded as cancelled, previous, out-of-hospital and "abandoned after onset" are excluded.

MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

NUMERATOR TIME WINDOW

Institutionalization

DATA SOURCE

Administrative data

LEVEL OF DETERMINATION OF QUALITY

Does not apply to this measure

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Rate

INTERPRETATION OF SCORE

Undetermined

ALLOWANCE FOR PATIENT FACTORS

Unspecified

STANDARD OF COMPARISON

External comparison at a point in time
External comparison of time trends
Internal time comparison

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

Unspecified

Identifying Information

ORIGINAL TITLE

Caesarean section rate.

MEASURE COLLECTION

[Health Indicators 2008](#)

DEVELOPER

Canadian Institute for Health Information

FUNDING SOURCE(S)

Canadian Government

COMPOSITION OF THE GROUP THAT DEVELOPED THE MEASURE

Employees: Canadian Institute for Health Information (CIHI) Health Indicators

FINANCIAL DISCLOSURES/OTHER POTENTIAL CONFLICTS OF INTEREST

None

ADAPTATION

Measure was not adapted from another source.

RELEASE DATE

2006 Jun

REVISION DATE

2008 May

MEASURE STATUS

This is the current release of the measure.

SOURCE(S)

Canadian Institute for Health Information (CIHI). Health indicators 2008: definitions, data sources and rationale. Ottawa (ON): Canadian Institute for Health Information (CIHI); 2008 May. 39 p.

MEASURE AVAILABILITY

The individual measure, "Caesarean Section Rate," is published in "Health Indicators 2008: Definitions, Data Sources and Rationale." This document is available in Portable Document Format (PDF) from the [Canadian Institute for Health Information \(CIHI\) Web site](http://www.cihi.ca/cihiweb/).

For more information, contact CIHI at, 4110 Yonge Street, Suite 300, Toronto, Ontario, Canada, M2P 2B7; Phone: 416-481-2002; Fax: 416-481-2950; E-mail: indicators@cihi.ca; Web site: <http://www.cihi.ca/cihiweb/>.

COMPANION DOCUMENTS

The following are available:

- Canadian Institute for Health Information (CIHI). Health indicators 2008. Ottawa (ON): Canadian Institute for Health Information (CIHI); 2008. 93 p. This document is available in Portable Document Format (PDF) from the [Canadian Institute for Health Information \(CIHI\) Web site](http://www.cihi.ca/cihiweb/).
- Canadian Institute for Health Information (CIHI). ICD-9/CCP, ICD-9-CM and ICD-10-CA/CCI codes for health indicators 2008. Ottawa (ON): Canadian

Institute for Health Information (CIHI); 2008. various p. This document is available from the [CIHI Web site](#).

NQMC STATUS

This NQMC summary was completed by ECRI Institute on October 10, 2008. The information was verified by the measure developer on December 18, 2008.

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